

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation CLA, INC.		3. FEC Identification Number <div style="border: 2px solid orange; padding: 5px; display: inline-block;"> C C90017294 </div>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 2600 VIRGINIA AVE NW SUITE 505		
(c) City, State and ZIP Code WASHINGTON DC 20037		
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report

☒ July 15 Quarterly Report ☐ 24-Hour Report

☐ October 15 Quarterly Report ☐ 48-Hour Report

☐ January 31 Year-End Report

b) Is this Report an amendment? ☒ No ☐ Yes, it amends the report filed on / /

5. COVERING PERIOD:

FROM / /

THROUGH / /

6. TOTAL CONTRIBUTIONS.....

7. TOTAL INDEPENDENT EXPENDITURES

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE _____

[Electronically Filed]

HIMMELSTEIN, MARC, , ,

HIMMELSTEIN, MARC, , ,

07/15/2018

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: F5N

Transaction ID :

CLA, Inc. reviewed its 2018 July Quarterly Report prior to filing and the report is complete as filed. CLA, Inc. had no contributions requiring disclosure.

Form/Schedule:

Transaction ID:

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 3 OF 8
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

CLA, INC.

Full Name (Last, First, Middle Initial) of Payee ADVANTAGE DIRECT		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 07 / 2018	
Mailing Address 2300 CLARENDON BOULEVARD SUITE 303		Amount 12500.00	
City ARLINGTON	State VA	Zip Code 22201	Transaction ID : F57.4236
Purpose of Expenditure PHONE CALLS	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SC District: 04
Name of Federal Candidate Supported or Opposed by Expenditure: KIMBRELL, JOSHUA BRETT, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 12500.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee ADVANTAGE DIRECT		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 07 / 2018	
Mailing Address 2300 CLARENDON BOULEVARD SUITE 303		Amount 12500.00	
City ARLINGTON	State VA	Zip Code 22201	Transaction ID : F57.4237
Purpose of Expenditure PHONE CALLS	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SC District: 04
Name of Federal Candidate Supported or Opposed by Expenditure: BRIGHT, LEE, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 25000.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee ADVANTAGE DIRECT		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 23 / 2018	
Mailing Address 2300 CLARENDON BOULEVARD SUITE 303		Amount 7500.00	
City ARLINGTON	State VA	Zip Code 22201	Transaction ID : F57.4269
Purpose of Expenditure PHONE CALLS	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SC District: 04
Name of Federal Candidate Supported or Opposed by Expenditure: TIMMONS, WILLIAM R. IV, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 312391.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	

(a) **SUBTOTAL** of Itemized Independent Expenditures.....▶ 32500.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures▶

(c) **TOTAL** Independent Expenditures.....▶
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 4 OF 8
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

CLA, INC.

Full Name (Last, First, Middle Initial) of Payee

ADVANTAGE DIRECT

Date of Public Distribution/Dissemination

MM / DD / YYYY
06 / 23 / 2018

Mailing Address

2300 CLARENDON BOULEVARD
SUITE 303

Amount

7500.00

Transaction ID : F57.4270

Purpose of Expenditure
PHONE CALLSCategory/
TypeOffice Sought: ☒ House State: SC
☐ Senate District: 04
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
BRIGHT, LEE, , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought

319891.00

Disbursement For: ☐ Primary ☐ General
2018 ☒ Other (specify) Runoff

Full Name (Last, First, Middle Initial) of Payee

ARENA ONLINE

Date of Public Distribution/Dissemination

MM / DD / YYYY
05 / 09 / 2018

Mailing Address

1780 W SEQUOIA VISTA CIRCLE

Amount

10000.00

Transaction ID : F57.4228

Purpose of Expenditure
MEDIA PLACEMENTCategory/
TypeOffice Sought: ☒ House State: PA
☐ Senate District: 13
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
HALVORSON, ARTHUR L, , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought

220535.00

Disbursement For: ☒ Primary ☐ General
2018 ☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

ARENA ONLINE

Date of Public Distribution/Dissemination

MM / DD / YYYY
05 / 09 / 2018

Mailing Address

1780 W SEQUOIA VISTA CIRCLE

Amount

10000.00

Transaction ID : F57.4229

Purpose of Expenditure
MEDIA PLACEMENTCategory/
TypeOffice Sought: ☒ House State: PA
☐ Senate District: 13
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
EICHELBERGER, JOHN H. JR., , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought

230535.00

Disbursement For: ☒ Primary ☐ General
2018 ☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 27500.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures.....
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 5 OF 8
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NAME OF FILER (In Full)

CLA, INC.

Full Name (Last, First, Middle Initial) of Payee CROSSROADS MEDIA		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 07 / 2018	
Mailing Address P.O. BOX 25093		Amount 12824.00	
City ALEXANDRIA	State VA	Zip Code 22313	Transaction ID : F57.4238
Purpose of Expenditure MEDIA PRODUCTION / MEDIA PLACEMENT	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: KIMBRELL, JOSHUA BRETT, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 37824.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee CROSSROADS MEDIA		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 07 / 2018	
Mailing Address P.O. BOX 25093		Amount 12824.00	
City ALEXANDRIA	State VA	Zip Code 22313	Transaction ID : F57.4239
Purpose of Expenditure MEDIA PRODUCTION / MEDIA PLACEMENT	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BRIGHT, LEE, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 50648.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee DDC PUBLIC AFFAIRS		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 22 / 2018	
Mailing Address 805 15TH STREET, NW SUITE 300		Amount 20000.00	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : F57.4276
Purpose of Expenditure PHONE CALLS	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: OK <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: COLEMAN, ANDY, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 100000.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	45648.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶ (carry total from last page forward to Line 7)	

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 6 OF 8
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NAME OF FILER (In Full)

CLA, INC.

Full Name (Last, First, Middle Initial) of Payee DEL CIELO MEDIA LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 28 / 2018	
Mailing Address 1427 LESLIE AVENUE SUITE 102		Amount 56500.00	
City ALEXANDRIA	State VA	Zip Code 22301	Transaction ID : F57.4201
Purpose of Expenditure MEDIA PLACEMENT/MEDIA PRODUCTION	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 16
Name of Federal Candidate Supported or Opposed by Expenditure: GONZALEZ, ANTHONY E, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee DEL CIELO MEDIA LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 28 / 2018	
Mailing Address 1427 LESLIE AVENUE SUITE 102		Amount 56500.00	
City ALEXANDRIA	State VA	Zip Code 22301	Transaction ID : F57.4202
Purpose of Expenditure MEDIA PLACEMENT/MEDIA PRODUCTION	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 16
Name of Federal Candidate Supported or Opposed by Expenditure: HAGAN, CHRISTINA, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee FLEXPOINT MEDIA INC		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 09 / 2018	
Mailing Address PO BOX 1051		Amount 87767.50	
City NEW ALBANY	State OH	Zip Code 43054	Transaction ID : F57.4223
Purpose of Expenditure MEDIA PRODUCTION / MEDIA PLACEMENT	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 13
Name of Federal Candidate Supported or Opposed by Expenditure: HALVORSON, ARTHUR L, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	200767.50
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶ (carry total from last page forward to Line 7)	

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 7 OF 8
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NAME OF FILER (In Full)

CLA, INC.

Full Name (Last, First, Middle Initial) of Payee FLEXPOINT MEDIA INC		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 09 / 2018	
Mailing Address PO BOX 1051		Amount 87767.50	
City NEW ALBANY	State OH	Zip Code 43054	Transaction ID : F57.4224
Purpose of Expenditure MEDIA PRODUCTION / MEDIA PLACEMENT	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 13 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: EICHELBERGER, JOHN H. JR., , ,		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought 210535.00			

Full Name (Last, First, Middle Initial) of Payee FLEXPOINT MEDIA INC		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 19 / 2018	
Mailing Address PO BOX 1051		Amount 250891.00	
City NEW ALBANY	State OH	Zip Code 43054	Transaction ID : F57.4246
Purpose of Expenditure MEDIA PRODUCTION / MEDIA PLACEMENT	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: SC <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BRIGHT, LEE, , ,		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff	
Calendar Year-To-Date Per Election for Office Sought 250891.00			

Full Name (Last, First, Middle Initial) of Payee FLEXPOINT MEDIA INC		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 22 / 2018	
Mailing Address PO BOX 1051		Amount 80000.00	
City NEW ALBANY	State OH	Zip Code 43054	Transaction ID : F57.4257
Purpose of Expenditure MEDIA PRODUCTION/MEDIA PLACEMENT	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: OK <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: COLEMAN, ANDY, , ,		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought 80000.00			

(a) **SUBTOTAL** of Itemized Independent Expenditures.....▶ 418658.50

(b) **SUBTOTAL** of Unitemized Independent Expenditures▶

(c) **TOTAL** Independent Expenditures.....▶

(carry total from last page forward to Line 7)

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 8 OF 8
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NAME OF FILER (In Full)

CLA, INC.

Full Name (Last, First, Middle Initial) of Payee

FLEXPOINT MEDIA INC

Date of Public Distribution/Dissemination

MM / DD / YYYY
06 / 23 / 2018

Mailing Address PO BOX 1051

Amount

39000.00

Transaction ID : F57.4251

Purpose of Expenditure
MEDIA PLACEMENTCategory/
TypeOffice Sought: ☒ House State: SC
☐ Senate District: 04
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
BRIGHT, LEE, , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought

304891.00

Disbursement For: ☐ Primary ☐ General
2018 ☒ Other (specify) Runoff

Full Name (Last, First, Middle Initial) of Payee

ISSUE MANAGEMENT, LLC

Date of Public Distribution/Dissemination

MM / DD / YYYY
05 / 09 / 2018

Mailing Address 115 E PARK AVENUE

Amount

35000.00

Transaction ID : F57.4217

Purpose of Expenditure
PHONE CALLSCategory/
TypeOffice Sought: ☒ House State: PA
☐ Senate District: 13
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
JOYCE, JOHN, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

35000.00

Disbursement For: ☒ Primary ☐ General
2018 ☐ Other (specify) Runoff

Full Name (Last, First, Middle Initial) of Payee

UBERMEDIA, INC.

Date of Public Distribution/Dissemination

MM / DD / YYYY
06 / 19 / 2018

Mailing Address 130 W. UNION STREET

Amount

15000.00

Transaction ID : F57.4249

Purpose of Expenditure
MEDIA PLACEMENTCategory/
TypeOffice Sought: ☒ House State: SC
☐ Senate District: 04
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
BRIGHT, LEE, , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought

265891.00

Disbursement For: ☐ Primary ☐ General
2018 ☒ Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures..... 89000.00

(b) SUBTOTAL of Unitemized Independent Expenditures 0.00

(c) TOTAL Independent Expenditures..... 814074.00
(carry total from last page forward to Line 7)